
From: Robinson, John R. </O=CVSCAREMARK/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=JRROBINSON>
To: Castro, Cassandra; Dubois, Amanda
CC: Spargo, James C.
Sent: 2/27/2014 10:31:38 AM
Subject: FW: Quarter 1 Stores Entering Controlled Substance Dispensing Program-Update
Attachments: RLPM CS Visit CVS 4606 (2-14-14).xlsx

Is there a disconnect somewhere? We should scrub the list then...send out reminders.

JOHN ROBINSON | CVS Caremark | Manager of Pharmacy Diversion | OFFICE 401.770.6549 | CELL 617.957.8203 | FAX 401.652.1808 | JRROBINSON@CVS.COM

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From: Spargo, James C.
Sent: Thursday, February 27, 2014 10:09 AM
To: Robinson, John R.
Subject: FW: Quarter 1 Stores Entering Controlled Substance Dispensing Program-Update

John,

I emailed this to Rx Regulatory and you on 2/11/14. They sent the email below to my Pharmacy Supervisor indicating it was not completed. Do I need to forward the send email to them again?

Thanks,

Jimmy

JAMES SPARGO | CVS Caremark | REGIONAL LOSS PREVENTION MANAGER | cell 912-414-4356 | fax 401-216-3840 | 12012 Abercorn St. Savannah, GA 31419 | james.spargo@cvscaremark.com

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From: Olberding, Thomas G.
Sent: Thursday, February 27, 2014 10:02 AM
To: Spargo, James C.

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PLAINTIFFS TRIAL
EXHIBIT

P-08405_00001

CVS-MDLT3-000028128

P-08405_00001

Subject: FW: Quarter 1 Stores Entering Controlled Substance Dispensing Program-Update

Jimmy,

Didn't we already do #1 below? Why does it show incomplete?

TOM OLBERDING | CVS/CAREMARK | PHARMACY SUPERVISOR | 912-634-1295 | C: 912-222-9530 | efax
401-216-0870 | 1600 FREDERICA RD STE 10, ST SIMONS ISLAND, GA 31522 | thomas.olberding@cvscaremark.com

From: Dubois, Amanda
Sent: Friday, February 21, 2014 3:57 PM
To: Olberding, Thomas G.
Subject: Quarter 1 Stores Entering Controlled Substance Dispensing Program-Update

To: Select Pharmacy Supervisors
Contact: Pharmacy Operations
Subject: Quarter 1 Stores Entering Controlled Substance Dispensing Program-Update

Overview: As you are aware, store **4206** has recently entered the Controlled Substance Dispensing Program. As the Pharmacy Supervisor of the store(s), you are required to complete three elements of the program as follows:

1. Conduct a store visit partnering with your RLPM providing supporting information as he/she completes the CS LP audit **Incomplete**
2. Document your findings for each listed red flag associated with the drug of concern into archer **Complete**
3. Discuss red flags and Corresponding Responsibility with each store pharmacist; have them sign the Statement of Acknowledgement and Commitment and email to Michelle Travassos **Incomplete**

At this time, you still have one or more elements of the program incomplete. Please remember the due date for 100% completion on all requirements is March 3rd.

Action Needed: If you have not already completed all requirements for your store(s), please plan accordingly to ensure completion by March 3rd.

From: Dancisin, Richard D. </O=CVSCAREMARK/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=RDDANCISIN>
To: Robinson, John R.
CC: RXRegulatory
Sent: 2/17/2014 4:56:34 PM
Subject: RLPM CS Visit CVS 4606 (2-14-14).xlsx
Attachments: RLPM CS Visit CVS 4606 (2-14-14).xlsx

CVS-MDLT3-000028130

DOCUMENT PRODUCED IN NATIVE FORMAT

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CVS-MDLT3-000028131

LP STORE REVIEW

Store Number:	4606	PIC	Seth Terlecky
City/State:	Warren, Ohio	RPH 1	Lyndsey Clemens
RLPM	Rick Dancisin		
Witness	Lisa Ciccollela-Rx Supervisor	Date:	2/14/2014

Read Legal disclaimer: The Company has been reviewing controlled substances dispensing for specific stores. Your store has had a significant number of prescriptions filled with respect to key identified characteristics. This review is being conducted at the request of counsel. Please keep this conversation confidential. The information you are being asked to provide will be reviewed by the compliance and legal departments.

"X" the box indicating the above disclaimer was read. X ☐

Pharmacy CII Hard Copy Script Overview

Review most recent C2 scripts (40-50)	RLPM Observations
What are the majority of CII prescriptions that were filled? Do they represent any drug categories? (i.e., opioids for pain management, opioids in general, and amphetamines) Do the majority of CII opioid prescriptions that were filled appear to have been written for a particular drug name(s)? Below is a list of CII opioids:	Opioids>Hydrocodone/APAP
OPIOIDS: hydromorphone (Dilaudid); methadone; oxycodone (single entity: oxycodone, Oxycontin, Roxicodone); oxycodone (combinations: Endocet, Percocet, Percodan, Roxicet, Tylox); Other opioids: morphine sulfate (MS Contin, Oramorph); oxymorphone (Opana); Fentanyl (Actiq, Duragesic)	
What are some common opioid dosage units?	Hydrocodone 5/325, 10/325, 7.5/325
Are there any out of area, 30 miles +, patients or prescribers? Describe	None
Who are the most common CII prescribers or medical offices? Note any common prescribers with same or similar drug dispensing	Torres
Are there multiple patients with same prescriber dropping off scripts at the same time? Are they similar prescriptions?	Yes, 2 Norco 10/325 within 3 minutes of each other and Norco 7.5/325 about 20 minutes later (Rx #'s 451473, 451471, 451478).
How many patients are receiving any specific drug combinations or multiple C2 scripts at one time?	Muscle relaxer/tramadol/Norco
How many hard copies reviewed had traits that would cause doctor follow up?	5
For any unusual or concerning scripts are there any notes on the hard copy or in patient profile indicating the store verified the script with the doctor?	No
Benzodiazepines/muscle relaxant: Alprazolam (Xanax); clonazepam (Klonopin); diazepam (Valium); carisoprodol (Soma)	

Pharmacy Background		
Interview Question	PIC	RPH 1
What type of area is the pharmacy located?	Inner City/Low Income	Elderly, welfare, Urban
What significant emergency rooms, nursing homes, long term care facilities, hospitals, medical centers, weight loss facilities, drug treatment facilities, and/or pain treatment facilities in the local area?	St. Joseph's and Trumbull Memorial Hospital, Torres Pain Mgmt. Clinic	Hospital/Pain clinics
Has there been recent changes to the area (i.e. other pharmacies opened or closed / new major prescribers / doctors no longer practicing)	Walgreen's has imposed limits on hydrocodone/oxycodone. They can't order once they are at a specific threshold, causing patients to come to	Changes with Walgreen's with limiting dispensing of hydrocodone and oxycodone.
Does difficult/questionable clientele frequent the pharmacy? (describe)	No	No
Drugs: Volume / Share / Growth		
Approximately how many CII prescriptions are filled daily?	N/A investigation is due to Hydrocodone Trending	
What is the fastest moving CII drug(s)? What is causing the volume?	N/A	
Has anything changed to cause an increase in C2 prescriptions?	N/A	
Does the pharmacist set aside opioids for particular customers? If yes, explain.	N/A	

Drugs: Oxycodone		
Interview Question	PIC	RPH 1
What drives the oxycodone/oxycontin scripts in your pharmacy?	N/A	
What prescribers prescribe the majority of your Oxy scripts? What type of practice do they have?	N/A	
What doctors do you verify scripts with because you are concerned with clientel or total quantity of oxy scripts?	N/A	
Is there a particular age range for patients receiving oxycodone scripts?	N/A	
Is there a prescriber who routinely prescribes oxycodone with other drugs? Who and what drugs?	N/A	
Do oxy patients attempt to fill scripts early? What is the procedure when they do?	N/A	
Does the pharmacist set aside opioids for particular customers? If yes, explain.	N/A	

Drugs: Hydrocodone		
Interview Question	PIC	RPH 1
What drives the hydrocodone scripts in your pharmacy?	Hospitals (emergency room) and pain clinics accounts for about 80% of the scripts.	Pain Mgmt 50% and Hospitals 35%.
What prescribers prescribe the majority of your hydrocodone scripts? What type of practice do they have?	Dr. Veres (father and son) average 90-120 tablets per scripts (Hydrocodone 10/325).	Torres and Veres
What doctors do you verify scripts with because you are concerned with clientel or total quantity of hydrocodone scripts?	Call to verify if patients are going to multiple doctores/early fills/OARRS reports flags them.	Torres and Veres
Is there a particular age range for patients receiving hydrocodone scripts?	Average age from pain clinics are 40-50 yrs and younger if coming from emergency room (hospitals).	Middle age from pain clinics.
Is there a prescriber who routinely prescribes hydrocodone and other drugs? Who and what drugs?	Torres & Veres. Hydro/Muscle Relaxer/Tramadol	Torres & Veres. Norco/Muscle Relaxers
Do hydrocodone patients attempt to fill scripts early? What is the procedure when they do?	Yes, but store has a 2 day policy before they fill a pain med script. Will make notes in profile for repeats.	Will not fill pain meds if outside of 2 days. Notes in profile.

Patients		
Interview Question	Average age from pain clinics are 40-50 yrs and younger if coming from	RPH 1
Do patients bring in multiple prescriptions in different individual's names? Does this occur with any particular prescriber?	Family members (husband/wife) both get pain meds about 5 couples like this. Dr Kotekal/D'Ambrosia/Ranieri but won't fill	Sometimes, husband/wife or mother/son.
Does one person pay for multiple patients prescriptions?	Only in cases stated above	
What is the age group of the majority of opioid prescriptions?	40-50 pain mgmt and 30's for emergency room.	Middle age pain clinics and younger for emergency room.
Do customers ask for any drugs by name, street name or color? (i.e. "M's" or "blues") If so, do you still fill these prescriptions?	No	No
Patient: Cash		
Do many patients pay cash price (no insurance) for opiod prescriptions?	Rarely, if they do not have insurance/Emergency Room. Will check OARRS.	Very rare, but check with OARRS.
Do they pay cash when they have insurance?	NO	NO
Do cash (non insurance) patients come from one particular doctor?	Emergency Room	Emergency Room
Patient: Distance		
Are there any <u>out of state prescribers</u> who have patients with controlled drugs prescribed that frequent the store?	No	No won't fill.
Are there many <u>out of state patients</u> who visit the pharmacy? What states?	Only 1 patient from Pennsylvania town that does not have a CVS there.	Not usually
Patient: Early Fill		
Do customers return too frequently with controlled drug prescriptions to be filled?	No, most know that they will not fill early.	No.

What is the standard practice for early fills?	2 days early is the store policy	Rule is 2 days early.
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Pharmacist

Does the pharmacist conduct and understand his/her corresponding responsibility to determine prescriptions are written for legitimate medical purpose? (s)	Yes	Yes
Did the pharmacist receive/review the narcotic dispensing guidelines? If NO, provide a copy of the guidelines .	Yes	Yes
Does the pharmacy have access to a PMP? (prescription monitoring program) How often is it used?	Yes-OARRS	Yes-OARRS. At least a couple of times per day.
What is your procedure to verify a script with a prescriber? Who calls? Who do you talk to? What information is obtained? Is a diagnostic code obtained?	Pharmacist calls/if hospital talk to doctor, if office talk to nurse who then talks to doctor.	Pharmacist calls and speaks with nurse in doctors office who then speaks to doctor.
How do you document verification with a doctor?	Write on Script	Document on Rx who they spoke to, why called and result of conversation.
Does the pharmacist refuse to fill the prescription after the verification process if he/she is uncomfortable with the prescriber's response(s)? (confirming the pharmacist does not "verify and fill".)	Refused 3 on the day of this investigation and will not script for oxycodone 30mg or over (will not carry).	Refuse 1-2 each day, due to early fills or need to verify through doctor and then refuse.
When a RED FLAG is seen in a script, (cash patient, out of area patient, script from doctor of concern), how do you exercise your professional judgement?	Person under the influence drugs/alcohol wont' fill. Call doctor's office/run OARRS report.	Check OARRS and if not familiar with doctor/ cocktails etc.
In the last 12 months, have you had any inquiry from BOP or law enforcement agency? Please detail contact.	None	None

In the last 12 months, has the DEA been in contact with your pharmacy or come in to conduct an inspection in the past year? If yes, what was the purpose of the interaction and were any concerns raised?	None	None
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Prescribers		
Interview Question	PIC	RPH 1
Does the store have a "DO NOT FILL" list? Who is on it?	Yes-for the following prescribers: Kotichal, Craig, D'Ambrosio, Ranieri.	Kotichal, Craig, D'Ambrosio, Ranieri
Do you fill for any prescribers out side your local area? Why are you comfortable filling these scripts.	No for pain clinics, but sometimes fill for Cleveland Clinic/Surgery Center located about 40 minutes away.	Just Cleveland Clinic
Are you aware of any prescriber that only takes cash for appointments?	No	No
Does a particular prescriber routinely prescribe a cocktail that includes a Opiod with one or two others? Who and what is prescribed?	Veres/Torres: Soma/Tramadol/Hydrocodone	Torres/Veres; see PIC's response
Has a prescriber brought in controlled drug prescriptions to be filled either for him/herself, a patient, or family member? Explain if yes	No	No
Do you have any concerns with any <u>Prescribers</u> for your patients? Who and why?	Torres/Veres	Torres/Veres

Prescribers of Concern

For any of the Prescribers of Concern brought forward by the RPh, answer below questions for any prescribe the PIC or RPH describes as a concern.

Prescriber:	Jose Torres	
DEA # or address of practice	BT5491434	
What is the concern?	lot of pain scripts and some cocktails prescribed.	
What do we know about this prescriber and why are we comfortable filling scripts?	Specialty in pain mgmt.	
What have we done to validate that the scripts are for a valid medical purpose?	Verified through doctors office and check OARRS.	
What is known about their patients? Age? Drugs prescribed? Cocktails? Early fills? Cash patients? Out of area prescriber or patients?	40-50 years old, no early fills, no cash payment issues and cocktails of tramadol and muscle relaxer.	
Are you currently filling for this prescriber?	Yes	
Prescriber:	Veres	
DEA # or address of practice	AR2944519 Specialty is primary care/sports medicine/geriatrics.	
What is the concern?	Lots of pain meds	
What do we know about this prescriber and why are we comfortable filling scripts?	Utilizes pain contracts	
What have we done to validate that the scripts are for a valid medical purpose?	Call office and check through OARRS.	
What is known about their patients? Age? Drugs prescribed? Cocktails? Early fills? Cash patients? Out of area prescriber or patients?	40-50 years old, Hydrocodone, no cash, none out of area.	
Are you currently filling for this prescriber?	Yes	

Prescribers of Concern

For any of the Prescribers of Concern brought forward by the RPh, answer below questions for any prescribe the PIC or RPH describes as a concern.

Prescriber:		
DEA # or address of practice		
What is the concern?		
What do we know about this prescriber and why are we comfortable filling scripts?		
What have we done to validate that the scripts are for a valid medical purpose?		
What is known about their patients? Age? Drugs prescribed? Cocktails? Early fills? Cash patients? Out of area prescriber or patients?		
Are you currently filling for this prescriber?		
Prescriber:		
DEA # or address of practice		
What is the concern?		
What do we know about this prescriber and why are we comfortable filling scripts?		
What have we done to validate that the scripts are for a valid medical purpose?		
What is known about their patients? Age? Drugs prescribed? Cocktails? Early fills? Cash patients? Out of area prescriber or patients?		
Are you currently filling for this prescriber?		

Please highlight any concerns with dispensing guidelines in regards to oxycodone and hydrocodone scripts or any concern surfaced by the data. What do you conclude based on your store investigation and interviews?

Please summarize any other pertinent information discovered during your visit that may need to be addressed or followed up on?

Please have the RX Sup comment on the controlled drug dispensing concerns in the store. Please address specific concerns communicated by corporate or general observations surfaced during the visit.

Concern:

ex: Cash scripts

Concern:

ex. Oxy volume

Concern:

ex. Distance traveled

Concern:

ex: Cash scripts

INSTRUCTIONS AFTER LP REVIEW COMPLETED:

1) Email completed document:

within 24 hours

2) Subject line for Email MUST read:

Store #_xxxx_____. Privileged and Confidential- prepared at the Direction of Counsel

3) Email to:

rxregulatory@cvs.com

JRROBINSON@CVS.COM